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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**Declaration  
Submitted  
With Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

04-0126-JACK

First Named Inventor

JACKAM, John P.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PRODUCTION OF BIODIESEL AND GLYCERIN FROM HIGH FREE FATTY ACID  
FEEDSTOCKS**

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/01 (05-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 26357 OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) John P.		Family Name or Surname Jackam	
Inventor's Signature <i>John P. Jackam</i>		Date 26-Jan-04	
Residence: City Butte	State MT	Country USA	Citizenship USA
Mailing Address 1901 South Franklin Street			
City Butte	State MT	ZIP 59701	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Joe M.		Family Name or Surname Pierce	
Inventor's Signature <i>Joe M. Pierce</i>		Date 1/26/04	
Residence: City Butte	State MT	Country USA	Citizenship USA
Mailing Address 1901 South Franklin Street			
City Butte	State MT	ZIP 59701	Country USA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet

Page 1 of 1

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Frank S.		Fahrenbruck	
Inventor's Signature <i>Frank S. Fahrenbruck</i>		Date <i>11/26/04</i>	
Butte	MT	USA	USA
Residence: City	State	Country	Citizenship
1901 South Franklin Street			
Mailing Address			
Mailing Address			
Butte	MT	59701	USA
City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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PTO/SB/81 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	<b>JACKAM, John P.</b>
Title	PRODUCTION OF BIODIESEL AND GLYCERIN FROM HIGH FREE FATTY ACID FEEDSTOCKS
Art Unit	
Examiner Name	
Attorney Docket Number	<b>04-0126-JACK</b>

I hereby appoint:

☒ Practitioners at Customer Number: **26357**

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name	<b>Robert M. Hunter</b>				
Address	<b>Robert M. Hunter PLLC</b>				
Address	<b>P.O. Box 2709</b>				
City	<b>Kamuela</b>	State	<b>HI</b>	Zip	<b>96743</b>
Country	<b>USA</b>				
Telephone	<b>808-885-4194</b>	Fax	<b>808-885-4114</b>		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Name	<b>John P. Jackam</b>		
Signature	<i>John P. Jackam</i>		
Date	<b>16-Jan-04</b>	Telephone	<b>406 723 2222</b>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of **3** forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/01 (06-03)

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	JACKAM, John P.
Title	PRODUCTION OF BIODEGRADABLE GLYCEROL FROM HIGH FREE FATTY ACID FEEDSTOCKS
Art Unit	
Examiner Name	
Attorney Docket Number	04-0126-JACK

I hereby appoint:

☒ Practitioners at Customer Number: 26357

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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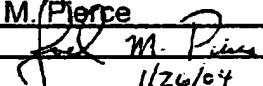
☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name	Robert M. Hunter				
Address	Robert M. Hunter PLLC				
Address	P.O. Box 2709				
City	Kamuela	State	HI	Zip	96743
Country	USA				
Telephone	808-885-4194	Fax	808-885-4114		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Joel M. Pierce				
Signature					
Date	1/26/04			Telephone	406 723-2222

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/81 (06-03)

Approved for use through 11/30/2005. OMB 0521-0022

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**POWER OF ATTORNEY  
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CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	JACKAM, John P.
Title	PRODUCTION OF BIO-DIESEL AND GLYCERIN FROM HIGH FREE FATTY ACID FEEDSTOCKS
Art Unit	
Examiner Name	
Attorney Docket Number	04-0126-JACK

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☒ Practitioners at Customer Number: 26357

OR

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<input type="checkbox"/> Firm or Individual Name	Robert M. Hunter				
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Address	P.O. Box 2709				
City	Kamuela	State	HI	Zip	96743
Country	USA				
Telephone	808-885-4194	Fax	808-885-4114		

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Name	Frank S. Fahrenbruck		
Signature	<i>Frank S. Fahrenbruck</i>		
Date	1/26/09	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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